

7780 Office Plaza Drive S. Suite 184 West Des Moines, IA 50266 Phone: 515.223.0159 Fax: 515.223.5429 www.kiesling.com

#### **REDACTED - FOR PUBLIC INSPECTION**

June 25, 2015

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554 Received & Inspected

JUI 0 1 2015

FCC Mail Room

Re:

WC Docket No. 14-58

2015 ETC Annual Report of Ruthven Telephone Exchange, Study Area Code 351284

Request for Confidentiality

Dear Ms. Dortch:

On behalf of Ruthven Telephone Exchange, Kiesling Associates LLP files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to Sections 54.313 and 54.422 of the Commission's rules. <sup>1</sup> Ruthven Telephone Exchange seeks confidential treatment under Protective Order for Section 54.313(f)(2) financial information. <sup>2</sup> The redacted version is also being filed this date via the FCC's Electronic Comment Filing System. In addition, an attached letter requests confidential treatment under Sections 0.457 and 0.459 of the initial Section 54.202(a) Five-Year Service Quality Improvement Plan as required by Section 54.313(a)(1).<sup>3</sup>

Please direct any questions about this filing to the undersigned at 515-223-0159 or cclauson@kiesling.com.

Sincerely,

KIESLING ASSOCIATES LLP

Cheuf a. Clauson

Cheryl A. Clauson, CPA Partner

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

<sup>&</sup>lt;sup>1</sup> 47 C.F.R. §§ 54.313, 54.422.

<sup>&</sup>lt;sup>2</sup> Connect America Fund et al., WC Docket No. 10-90 et al., Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

<sup>&</sup>lt;sup>3</sup>47C.F.R. §§ 0.457, 0.459, 54.313(a)(1).



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Re: WC Docket 14-58

2015 ETC Annual Report of Ruthven Telephone Exchange, Study Area Code 351284

Dear Ms. Dortch:

On behalf of Ruthven Telephone Exchange (the "Company"), Kiesling Associates LLP hereby requests withholding from public inspection certain information contained in an attachment to the above referenced reporting requirement, pursuant to Sections 0.457 and 0.459 of the Commission's rules,<sup>1</sup>. The Company provides the following in support of its request, numbered consistent with the subparagraphs of Section 0.459(b).<sup>2</sup>

- 1. The information for which the Company is seeking confidential treatment is the attachment at Line 112 of the Company's annual reporting information in FCC Form 481, pursuant to Sections 54.313 and 54.422 of the Commission's rules ("Report").<sup>3</sup>
- 2. Pursuant to Section 54.313(a)(1), Rate-of-Return Eligible Telecommunications Carriers ("ETCs") must file with the Commission a Progress Report on its Five-Year Service Quality Improvement Plan ("Progress Report") which is contained in the attachment to the 2015 Report.<sup>4</sup>
- 3. The information contained in attachment for which the Company seeks the withholding from public inspection is the entirety of data pertaining to the Company's Five-Year Plan, as provided at FCC Form 481 Line 112 attachment. Information of this nature is confidential commercial information routinely withheld from public inspection.
- 4. With respect to identifying the degree to which the subject attachment concerns a service that is subject to competition, the information is of a financial and competitive nature regarding the provision of telecommunications services. The Line 112 attachment contains competitively sensitive information related to proposed improvements or upgrades and maintenance the Company's network.

<sup>1 47</sup> C.F.R. §§ 0.457, 0.459.

<sup>&</sup>lt;sup>2</sup> 47 C.F.R. § 0.459(b)(1) through (9).

<sup>3 47</sup> C.F.R. §§ 54.313, 54.422.

<sup>&</sup>lt;sup>4</sup> 47 C.F.R. §§ 54.313(a)(1).

In its March 5, 2013 Order, the FCC specified that for rate-of-return carriers, the five-year plans "should describe the carrier's network improvement plan, which should provide greater visibility into current plans to extend broadband service to unserved locations in rate-of-return service territories." The Company is a rate-of-return carrier filing its five-year service improvement plan which contains proprietary, competitively sensitive information related to the Company's existing network including the specific locations of customers as well as describe proposed improvements or upgrades and maintenance of its network throughout its service area. Specifically, this information sets forth services provided by the Company over its existing network including specific locations of customers as well as planned network improvement and maintenance for the years 2015 through 2019 including project start and completion dates, population that will be impacted by the improvements and upgrades at the wire center level and projected capital costs associated with the improvements and upgrades and operating costs associated with maintaining the network including depreciation for investments that have already been made. As such, this information contains competitively sensitive information related to the Company's existing network as well as detailed plans at the wire center level for network upgrades and maintenance projected for the years 2015 through 2019.

- With respect to identifying possible exposure to competitive harm, the information contained in the Line 112 attachment is information that is not customarily released to the public. This information is proprietary to the Company, is unique to the Company's serving territory and is only known to the Company and its authorized agents. If the Information is not protected, it would have economic value to existing and potential competitors who would be able to target their marketing to specific customers. In a competitive telecommunications marketplace, this type of information is highly sensitive. If publicly disclosed, it would enable competitors to craft business plans that capitalize on their knowledge of the locations of the Company's customers which would place the Company at a competitive disadvantage.
- 6. With respect to steps the Company has taken to ensure against unauthorized disclosure of the information contained in the attachment, the Company is filing the attachment under seal. The Company uses the information contained in the Five-Year Plan to ensure that its customers continue to receive state-of-the-art high quality telecommunications and broadband services that the Company has been providing to them for many years as well as to satisfy mandatory reporting requirements and does not share the information for which protection is sought. The Company protects the secrecy of this information with a security protocol that ensures the information is not inadvertently disclosed or disseminated. Only directors, managers and employees with a direct need to know are authorized to access the information.
- 7. Previous versions of this information are not publicly available.
- 8. Because the information is not routinely available, a need exists for maintaining the confidentiality of this information permanently.
- Not applicable.

<sup>&</sup>lt;sup>5</sup> See Connect America Fund et al., WC Docket 10-90 et al., Order, DA 13-332 (rel. Mar. 5, 2013) ("March 5, 2013 Order") at para. 9 citing Section 54.202(a) (1) (ii).

Based on the preceding, Kiesling respectfully requests on behalf of the Company that the Commission grant confidential treatment under Section 0.459 to Company's Five-Year Plan provided at FCC Form 481 Line 112 attachment.

Please contact the undersigned at 515-223-0159 or cclauson@kiesling.com with questions regarding this request.

Sincerely,

KIESLING ASSOCIATES LLP

Cheuf a. Clauson

Cheryl A. Clauson, CPA Partner

100/19/20/20/20	m 481 - Carrier Annual Reporting Data Collection Form			0	CC Ferm 481 148 Control No. 3060 Iv 2013	CORA/ORAN Control	Ns. 306p-0819
<010>	Study Area Code	351284			Danalus	al D. Imana	-4-3
<015>	Study Area Name	RUTHVEN TEL E	EXCHANGE		Heceive	d & Inspe	ciea
<020>	Program Year	2016				0 1 201	<u>-</u>
<030>	Contact Name: Person USAC should contact with questions about this data	Ivan Dalen		100 2 6 6 6 6	J(J)	0 1 201	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7128375522 ex	kt.		FCC	Mail Roo	om
<039>	Contact Email Address: Email of the person identified in data line <030>	idalen@rvtc.n	iet				
ANNUA	ll reporting for all carriers					\$4.313 Completion Required (check box wh	54.422 Completion Required
<100>	Service Quality Improvement Reporting			(complete attached works)	neet)	1	18881
	Outage Reporting (voice)			(complete attached works)	neet)		_ /
<210> <300>	Unfulfilled Service Requests (voice)	outages to repor	t			✓	111111
<310>	Detail on Attempts (voice)						
					(attach descriptive de	ocument)	
<320>	Unfulfilled Service Requests (broadband)		-486		· <u></u> 0	✓	11111
<330>	Detail on Attempts (broadband)				(attach descriptive o	document)	
<400> <410>	Number of Complaints per 1,000 customers (voice) Fixed 0.0	_					
<420>	Mobile 0.0						/
<430>	Number of Complaints per 1,000 customers (broadb	and)				<b>—</b>	1866
<440>	Fixed 0.0						22227
<450> <500>	Mobile 0.0 Service Quality Standards & Consumer Protection Ru 351284ias10.pdf	ules Compliance		(check to indicate certifica	ition)	<b>_</b>	✓
<510>				(attached descriptive do	ocument)	<b>4</b>	1
<600>	Functionality in Emergency Situations 3512841a610.pdf			(check to indicate certifica	ition)		_ /
<610>				(attached descriptive docur	ment)	<b>✓</b>	✓
<700>	Company Price Offerings (voice)			(complete attached works	heet)	<b>✓</b>	171111
<710>	Company Price Offerings (broadband)			(complete attached works	heet)		11115
	Operating Companies and Affiliates			(complete attached works			17777
	Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability Certification		(if ye	s, complete attached worksi	heet)	<b>V</b>	
<1010>	351284ia1010.pdf			(attach descriptive docum	ent)	<b>/</b>	
<1100>	Certify whether terrestrial backhaul options exis	t (Yes or 🖸	0	(if not, check to indicate	certification)	<u> </u>	11111
<1110>				(complete attached works	heet)		11111
	Terms and Condition for Lifeline Customers	2 2002	UUU - 2777	(complete attached works	heet)	111111	
	Price Cap Carriers, Proceed to Price Cap Additional D	No. of the same	102	<del></del>			
<2000>	Including Rate-of-Return Carriers affiliated with Price	ce Cap Local Exc	nange (	Carriers (check to indicate certificat	tion)		13.33.35
<2005>				(complete attached worksh			1. 1. 1. 1. 1. 1. 1.
<3000>	Rate of Return Carriers, Proceed to ROR Additional L	ocumentation	Worksh	neet (check to indicate certificat	tion)	/	11115
<3005>				(complete attached worksh		1	11111

	ervice Quality Improvement Reporting illection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013	0819
<010>	Study Area Code	351284			
<015>	Study Area Name	RUTHVEN TEL	EXCHANGE		
<020>	Program Year	2016	1330000		
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen			
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522	ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc	.net		
<110>	Has your company received its ETC certification from the FCC?	(ye	s/no) <b>O</b>		
12.22	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5				
<111>	year plan" filed with the FCC?	(ye	s/no) U U	480	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your co CETC which only receives frozen support, your progress report is only required to address voice telephony service.	ompany is a	351284ia112.pdf		
	Please select the appropriate responses below (Yes, No, Not Applicable) to cont that the attached document(s), on line 112, contains a progress report on its five year service quality improvement plan pursuant to §54.202(a). The information shall	ve-		Name of Attached Document	
<113>	Maps detailing progress towards meeting plan targets		Yes		
<114>	Report how much universal service (USF) support was received		Yes		
<115>	How much (USF) was used to improve service quality and how support was used to improve	rove service	Yes		
<116>	How much (LISE) was used to improve service coverage and how support was used to im-		Yes		
<117> <118>	How much (USF) was used to improve service capacity and how support was used to improved an explanation of network improvement targets not met in the prior calendar year.		Yes Not Applicable		

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net

<220>

<a>&gt;</a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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									7.00		
					7						

(200) Pete	Offerings including Voice Rate Date	FCC Form 481
	ection Form	OMB Control No. 3060-0986/DM8 Control No. 3060-0819
		bly 2013
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalenærytc.net
<701>	Residential Local Service Charge Effective Date 1/1/2015	
<702>	Single State-wide Residential Local Service Charge	

<703>

<=1>	450	<033	<b1></b1>	×62>	×63>	是 IKBAX	<bs>465&gt;</bs>	40
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
-							100	
				See at	tached worksheet			
					11112			

S-48048 (040-05141 (051)	action Form	FCC Form 481 OMS Centrol No. 3060-0986/OMS Centrol No. 3060-0819 July 2013
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net

GD.	ob.	   	452>	- dx	<d1>.</d1>	400	rd3×	<64>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
	- X		See attac worksheet -	hed				
×								

102270100000000	erating Companies			FCC Form 481
Data Coll	lection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
10:150				
<010>	Study Area Code		351284	
<015>	Study Area Name		RUTHVEN TEL EXCHANGE	
<020>	Program Year		2016	
<030>	Contact Name - Person	USAC should contact regarding this data	Ivan Dalen	74100
<035>	Contact Telephone Nur	mber - Number of person identified in data line <030>	7128375522 ext.	
<039>	Contact Email Address	- Email Address of person identified in data line <030>	idalen@rvtc.net	
<810>	Reporting Carrier	Ruthven Telephone Exchange		
<811>	Holding Company	River Valley Telecommunications Coop		
<812>	Operating Company	Ruthven Telephone Exchange	ii.	

813>	STATE CONTRACTOR OF THE STATE O	422	⟨ <b>xa3&gt;</b>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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<i>2</i> )			M 14
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		0.00 C C C C C C C C C C C C C C C C C C	

	oal Lands Reporting ection Form	FCC Form 481 OMB Control No. 3060-0986/QMB Control No. 3060-0819 July 2013
Ecological Control		A SALAR SALA
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	Name of Attached Document
If your o	company serves Tribal lands, please select (Yes,No, NA) for each these	
boxes		
to confi	trates coordination with the Tribal government nursuant to	Select ses or No or sot
<921>	Needs assessment and deployment planning with a focus on Tribal	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	
	1	

THE COURSE OF THE PERSON NAMED IN	No Terrestrial Backhaul Reporting Mection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	351284	
<015>	Study Area Name	RUTHVEN TEL EXCHANGE	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net	
	Please confirm whether terrestrial backhaul options exist within the supported area		
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 2 kbps	Notes III	

Lifeline	rms and Condition for Lifeline Customers	4.7 4.7	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code		351284
<015>	Study Area Name		RUTHVEN TEL EXCHANGE
<020>	Program Year		2016
<030>	Contact Name - Person USAC should contact regarding this data		Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data lin	ne <030>	> 7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ne <030	0> idalen@rvtc.net
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		351284ia1210.pdf
<1220>	Link to Public Website	НТТР —	Name of Attached Document
1210, or the we	heck these boxes below to confirm that the attached document(s), on line ebsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers m		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	1	İ
<1222>	Details on the number of minutes provided as part of the plan,	/	]
<1223>	Additional charges for toll calls, and rates for each such plan.	<b>/</b>	İ

551.000 EWIT		
(2000) Pr	te City Carrier Additional Documentation	FCC Form 481
Data Coll	ection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including	Rate of Return Carriers offiliated with Price Cap Local Exchange Carders	10ly 2013
5000000	MERCH 1820 15 88 1941	
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7126375522 EXL.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalenervic.net
Zalaka ka		
Select th	appropriate responses below (Yes. No. Not Applicable) to note compliance as	s a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, a
		mation reported on this form and in the documents attached below is accurate.
	Incremental Connect America Phase I reporting	
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1)i)	
<2011a	그리아 지난 [1000] [101] 이 시민은 지난 1000] 아이가 되었다면 하지만 하지만 하게 되었다.	
	1	
<2011b	Attachment (47 CFR § 54.313(b)	l l
		Name of Attached Document(s) Listing Required
72233	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))	,
<2012		
<2013	20 항상 하다 이용 10 10 10 10 10 10 10 10 10 10 10 10 10	
<2014	~~~ [2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	
<2015	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))	
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	
<2016	Certification Support Used to Build Broadband	
	Connect America Phase II Reporting (47 CFR § 54.313(e))	
<2017		
<2018	5th year Broadband Service Certification	
<2019		
<2020	Please check the box to confirm that the attached document(s), on	the second of the second of
	nursuant to 6.54.313 (a)(3)(ii) as a reginient of CAF Phase II support	the contains the reduired t shall revive the number names
	addresses of community anchor institutions to which hegan providing	ing access to broadband service in
	preceding calendar	
<2021	Interior Progress Community Anches Institutions	
<2021	Interim Progress Community Anchor Institutions	
		1
		1

扩充的效		
THE PARTY HE	Re Of Return Certiles Additional Documentation	1600 form 481
Data Coll	ection Form	OMS Control No. 3060-0985/OM8 Control No. 3060-0819
		loby 2013
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<030>	Program Year  Contact Name - Person USAC should contact regarding this data	2016 Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net
CHECK 1	he boxes below to note compliance on its five year service quality plan (pursua)	at to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47
		e Information reported on this form and in the documents attached below is accurate.
		351284ia3010.pdf
(3010)	Progress Report on 5 Year Plan	
	Milestone Certification (47 CFR § 54.313(f)(1)(i))	
		Name of Attached Document Listing Required Information
(3011)	Please check this box to confirm that the attached document(s) on li	
	§ 54.313 (f)(1)(ii), the carrier shall provide the number, names, and a	ddresses of community anchor institutions to which
	providing access to broadband service in the preceding calendar year began	
(3012)	Community Anchor Institutions (47 CFR § \$4.313(f)(1)(ii))	
(SOLE)	Community Andrew mathematics (4) CTA 3 34-323(1)(2)(1))	
		Name of Attached Document Listing Required Information
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No)
(3014)	If yes, does your company file the RUS annual report	(Yes/No) ( )
Please	check these boxes to confirm that the attached document(s), on line	3017, contains the required information pursuant to § 54.313(f)(2) compliance
(3015)	Electronic copy of their annual RUS reports (Operating Report for	III
	Telecommunications Borrowers)	<u>=</u>
(3016)	Document(s) for Balance Sheet. Income Statement and Statement of	
		351284ia3017.pdf
(3017)	If the response is yes on line 3014, attach your company's RUS annual	
	report and all required documentation	
		Name of Attached Document Listing Required Information
(3018)	If the response is no on line 3014, Is your company audited?	(Yes/No) iQiQ
(3010)		(May May )
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a fi	ormat comparable to RUS Operating Report for Telecommunications
		<b>H</b>
(3020)	Document(s) for Balance Sheet. Income Statement and Statement	of Cash
(3021)	Management letter and audit opinion issued by the independent certifie	ed public accountant that performed the company's
	If the response is no on line 3018, please check the boxes below	
	to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a	
	format comparable to RUS Operating Report for Telecommunications	
	Borrowers,	
(3023)	Underlying information subjected to a review by an independent certified	
(9024)	public accountant	<b>—</b>
(3024)	Underlying information subjected to an officer certification.	
,	Document(s) for Balance Sheet. Income Statement and Statement	17.360
	00 No. 10 No.	
(3026)	Attach the worksheet listing required information	
	1	
		Name of Attached Document Listing Required Information

LINES 3027-3034

LINES REDACTED IN ENTIRETY

1 CONT. TO SEC. 19.	son - Reporting Carries scrion Form	FCC Form 481 OMS Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

[1] 경기 경기 전투 경기 전문	onsibilities include ensuring the accuracy of the annual reporting requirements for universal service support in reported on this form and in any attachments is accurate.
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

000000000000000000000000000000000000000	ion Agent / Carriar ection Form	FCC Form 4812 OM6 Control No. 3050-0986/OM8 Control No. 3060-0819 July 2013
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)_ <u>Kieslings</u> also certify that I am an officer of the reporting carrier; my responsibilit agent; and, to the best of my knowledge, the reports and data provided	is authorized to submit the information reported on behalf of the reporting carrier es include ensuring the accuracy of the annual data reporting requirements provided to the authorized to the authorized agent is accurate.
Name of Authorized Agent: Kieslings	199 MA 199
Name of Reporting Carrier: RUTHVEN TEL EXCHANGE	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2015
Printed name of Authorized Officer: Ivan Dalen	
Title or position of Authorized Officer: General Manager	N. C. C. C. S.
Telephone number of Authorized Officer: 7128593300 ext.	
Study Area Code of Reporting Carrier: 351284	Filing Due Date for this form: 07/01/2015

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or L	Recipients on Behalf of Reporti	ng Carrier
, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal servic he data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the		
lame of Reporting Carrier: RUTHVEN TEL EXCHANGE		
lame of Authorized Agent or Employee of Agent: Kieslings		
ignature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/19/2015
rinted name of Authorized Agent or Employee of Agent: Kieslings		
itle or position of Authorized Agent or Employee of Agent Regulatory Consultant		
elephone number of Authorized Agent or Employee of Agent: 5152230159 ext.		
study Area Code of Reporting Carrier: 351284 Filing Due Date for this form:	07/01/2015	

Attachments

**ATTACHMENT - LINE 112** 

ATTACHMENT REDACTED IN ENTIRETY

# FCC Form 481, Line 510: Certification of Compliance with Applicable Service Quality Standards and Consumer Protection Rules

Iowa Administrative Code §199-22.6 requires an ETC to certify in its annual report that it is complying with applicable service quality standards and consumer protection rules. The ETC will measure its service connection, held order, and service interruption performance monthly according to this section. Ruthven Telephone Exchange certifies that it has complied with these requirements and will continue to comply with these requirements.

## FCC Form 481, Line 610: Certification Regarding Ability to Function in Emergency Situations

Iowa Administrative Code §199-22.6(5) requires an ETC to certify in its annual report that it is complying with provisions to meet emergencies including but not limited to the provision of emergency power. Each central office shall contain a minimum of two hours of battery reserve and for offices without permanently installed emergency power facilities, there shall be access to a mobile power unit with enough capacity to carry the load which can be delivered on reasonably short notice and readily connected. Ruthven Telephone Exchange certifies that it has complied with these requirements and will continue to comply with these requirements.

SALES OF THE SALES	ce Officings Including Moice Rate Data extlan FormCo	PCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net
<701> <702>	Residential Local Service Charge Effective Date  1/1/2015 Single State-wide Residential Local Service Charge	

<703>

<a1></a1>	5 <625	683b	<b1></b1>	  b2> #/	56 K 2 Kb3>	×64>		Balding Cold & A. A.
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
IA	Ruthven		FR	16.0	0.0	0.0	0.0	16.0
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		-						-
		-		-				<del> </del>
								<del>                                     </del>

Data Collection Form.  DWB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	351284
<015>	Study Area Name	RUTHVEN TEL EXCHANGE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Ivan Dalen
<035>	Contact Telephone Number - Number of person identified in data line <030>	7128375522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	idalen@rvtc.net

state	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	T	Rroadband Service -Upload Speed (Mbps)	Usage Allowance	Usage Allowance Action Taken When Limit Reached (select)
IA	Ruthven	34.95	0.0	34.95	1.0	0.5	999999	Other, No Limit
IA	Ruthven	39.95	0.0	39.95	1.0	1.0	999999	Other, No Limit
AI	Ruthven	39.95	0.0	39.95	2.0	0.5	999999	Other, No Limit
IA	Ruthven	44.95	0.0	44.95	2.0	1.0	999999	Other, No Limit
AI	Ruthven	49.95	0.0	49.95	3.0	1.0	999999	Other, No Limit
IA	Ruthven	54.95	0.0	54.95	3.0	2.0	999999	Other, No Limit
IA	Ruthven	54.95	0.0	54.95	5.0	1.0	999999	Other, No Limit
IA	Ruthven	64.96	0.0	64.96	5.0	2.0	999999	Other, No Limit
IA	Ruthven	69.95	0.0	69.95	10.0	1.0	999999	Other, No Limit
IA	Ruthven	79.95	0.0	79.95	10.0	2.0	999999	Other, No Limit
IA	Ruthven	89.95	0.0	89.95	10.0	3.0	999999	Other, No Limit
IA	Ruthven	84.95	0.0	84.95	12.0	1.0	999999	Other, No Limit
IA	Ruthven	94.95	0.0	94.95	12.0	2.0	999999	Other, No Limit
IA	Ruthven	104.95	0.0	104.95	12.0	3.0	999999	Other, No Limit
IA	Ruthven	129.95	0.0	129,95	15.0	1.0	999999	Other, No Limit
IA	Ruthven	139.95	0.0	139.95	15.0	2.0	999999	Other, No Limit
IA	Ruthven	149.95	0.0	149.95	15.0	3.0	999999	Other, No Limit
_		1						

# FCC Form 481, Line 1010: Voice Services Rate Comparability

As of January 1, 2015, the ETC's pricing of fixed voice service (reported on line 703 of this filing) is below the current national average urban rate for voice service (\$47.48), as published annually by the Wireline Competition Bureau.

#### FCC Form 481, Line 1210: Terms and Condition for Lifeline Customers

#### Lifeline Telephone Assistance Program

Financial assistance through the Lifeline program is available to help eligible Iowans afford and maintain basic telephone service. Lifeline participation enables Iowans to stay connected to jobs, family, community resources, and government and emergency services. Lifeline is a federal government program that assists qualified Iowans by providing a monthly credit of \$9.25 on the local telephone bill.

The Lifeline program has recently been streamlined by the Federal Communications Commission. Lifeline benefits are now limited to one wire line or wireless phone per qualified household. Households currently receiving more than one Lifeline service must select a single Lifeline service provider and de-enroll from the program with any other provider(s).

Households eligible for or already receiving Medicaid, the Supplemental Nutrition Assistance Program, Supplemental Security Income Program, Federal Public Housing Assistance Program, Low-Income Home Energy Assistance Program, Temporary Assistance to Needy Families Program, or the National School Lunch Program may qualify. Consumers may also qualify based on their level of income. For more information, please see the Board's 2014 Lifeline Week news release.

A Lifeline <u>application form</u> is available from your local telephone service provider, the Iowa Utilities Board, or most <u>Community Action Agencies</u> in the state. To apply, simply complete the application form and then return it to your chosen participating provider. Additionally, residents of Tribal lands who are eligible for Lifeline, should check with their local telecommunications provider to inquire about additional benefits, including potential Link-Up telephone-installation benefits.

Re-certification forms are sent to all Lifeline subscribers each year. In order to continue receiving Lifeline assistance, these forms must be completed and returned to the subscriber's local telecommunications provider within 30 days. If the re-certification form is not returned, the telecommunications provider will discontinue the subscriber's Lifeline assistance.

Information about the <u>number of customers receiving Lifeline assistance</u> is reported by each Iowa telephone company. For more information, call the Iowa Utilities Board toll free at 1.877.565.4450, or visit www.fcc.gov/lifeline or www.usac.org.

Number of local minutes provided: Unlimited local calling

Equal access toll calls are available and are billed at carriers' standard rates for Lifeline subscribers.

REDACTED - FOR PUBLIC INSPECTION									
River Va Coopera		elecommunications	SERVICES CATALO	OG Revised	Sheet No				
Filed with	n Boa	ard	SERVICE CHARGI	ES					
A. LIF	ELIN	IE ASSISTANCE							
1.	The Federal Lifeline Assistance Program is a plan which assists qualified low-income applicants with reductions in their monthly local exchange service rate. The assistance applies for a single telephone line at the applicant's principal place of residence Qualified applicants shall have their monthly local exchange service rate reduced by the federal support amount defined in 47 CFR 54.403.								
2.	<ol> <li>Eligibility Requirements         To be eligible for assistance, an applicant must provide documentation showin applicant (1) meets income-based criterion currently defined as at or below 135 per of the Federal Poverty Guidelines, OR (2) participates in at least one of the followord programs as defined by 47 CFR 54.409:     </li> </ol>								
	<ul> <li>a. Medicaid (e.g. Title XIX/Medical, state supplemental assistance)</li> <li>b. Supplemental Nutrition Assistance Program (SNAP)</li> <li>c. Supplemental Security Income (SSI)</li> <li>d. Federal public housing assistance</li> <li>e. Low-Income Home Energy Assistance Program (LHEAP)</li> <li>f. Temporary Assistance for Needy Families Program (TANF)</li> <li>g. National School Lunch Program</li> </ul>								
	The Lifeline customer is responsible for notifying the Company if the customer ceases participate in any of the public assistance programs listed above.								
	A Lifeline customer may only receive assistance from one wireline or one w telephone provider per household.								
3.	An	elication for Assistance applicant shall request vided by the Company		on of a certification form					
4.	Rate a.	The Lifeline custome		credit toward their local exchange in 47 CFR 54.403 shall be used to					
b. Toll blocking shall be included with this service offering without charge. deposit would be required if applicant voluntarily elects toll blocking with of Lifeline Service.									
ISSUED:		November 1, 2014 Date	EFFECTIV	E: Dece	ember 1, 2014 Date				

General Manager Title Graettinger, IA 51342

Address

Ivan Dalen

Name

## Line 3010 Progress Report on 5 Year Plan - Milestone Certification

The Company certifies that it is progressing to provide upon a reasonable request, broadband services at actual speeds of 4Mbps downstream/1Mbps upstream, with latency suitable for real-time applications including VoIP and usage capacity that is reasonably comparable to reasonably comparable offerings in urban areas, and that requests for such service are met within a reasonable amount of time.

# **ATTACHMENT - LINE 3017**

# ATTACHMENT REDACTED IN ENTIRETY